In this special jam-packed double-feature, EyeWorld Asia-Pacific examines difficult anterior segment ophthalmic surgery cases both cataract and refractive

Cover Feature: Challenging cases

Challenging cataract/IOL Unusual dilation – page 7 Marfan's syndrome – page 10 Capsular retraction - page 14 Fuchs' dystrophy – page 16 Toric misalignment – page 19 Blepharitis and premium IOLs – page 23

Challenging refractive Ingrowth nests – page 26



Letters from the Editors



Dear Friends

n this issue of *EyeWorld Asia-Pacific*, we focus on several challenging scenarios that we can all expect to encounter at some point in our careers.

The cases presented include persistently dilated pupils, dislocated lenses, unexpected hyperopic results with accommodative lenses, toric IOL misalignments and the problem of cataract surgery with compromised

corneas. There is an equally challenging selection of cases in refractive surgery, including epithelial ingrowth, diffuse interface fluid syndrome, and solutions to post-LASIK ectasia.

We are extremely grateful to the surgeons who have shared their challenging cases and the thoughtful approach of our contributors particularly from the Asia-Pacific region for their suggestions and strategies that have proved to be useful in managing these difficult situations.

This issue therefore contains more than just pearls of wisdom but rather an entire treasure chest of invaluable comments and suggestions that I am sure will help each and every reader who no doubt will encounter similar cases in their practice of cataract and refractive surgery.

It is often said that the only way to avoid complications is to not perform surgery. More seriously, we all understand that difficult cases are an inherent part of a surgical practice and I hope this issue will be helpful when you encounter similar challenging situations.

As this will be our last issue for the calendar year, I would like to wish all readers of EyeWorld Asia-Pacific a healthy, happy, and restful festive season. I would also like to thank our regional co-editors as well as our board members and editorial staff at APACRS for their dedication in ensuring we maintain a high quality, entertaining, and educational news journal.

Warmest regards

floor

Graham Barrett, MD President, APACRS Chief Medical Editor, EyeWorld Asia-Pacific



Dear Friends

t is with great pleasure that I welcome all to this latest edition of EyeWorld Asia-Pacific.

The cover feature for this issue is Challenging cataract and refractive cases.

Cataract surgery has been refined to the point of being almost perfect; nonetheless, difficult situations such as subluxated cataracts still present great challenges to even the most accomplished cataract surgeons.

This issue has experts dealing with the pros and cons of surgical approaches to the progressive lens subluxation associated with Marfan's syndrome.

Meanwhile, the higher prevalence of cataract in patients with Fuchs' dystrophy poses a dilemma for surgeons—whether to perform DSAEK alone or combined with cataract surgery. Guidelines for decision making in these cases are discussed in this issue.

Toric IOLs are the biggest advance in IOL refractive technology in the last decade, but issues like rotational instability may give rise to refractive surprises postoperatively. The dos and don'ts during surgery using a toric IOL to avoid such refractive surprises are also discussed.

Finally, LASIK keratectasia is a rare but sight-threatening complication of LASIK. This issue's double cover feature closes with a discussion of the benefits as well as side effects of using corneal collagen crosslinking to arrest LASIK ectasia.

This issue also updates anterior segment surgeons on retinal issues in cataract surgery ranging from intraoperative nucleus drop to postoperative cystoid macular edema and endophthalmitis. Posterior segment complications of cataract surgery can be avoided by thorough preoperative evaluation of patients before cataract surgery. This enables surgeons to anticipate possible pitfalls while performing cataract surgery. Even if there are complications like nucleus drop or cortical drop, they can be better managed if already anticipated as vitreoretinal surgeons are ready to take over. In some settings where vitreoretinal surgeons routinely perform cataract surgery, it would probably be beneficial for patients if complicated cataract surgeries are performed by vitreoretinal surgeons alone.

Endopthalmitis, while rare, remains one of the most devastating potential complications of ophthalmic surgery. The APACRS symposium on endophthalmitis tackled the various controversies in the management of endophthalmitis.

I hope this discussion of a variety of ophthalmic conditions will be of interest to everyone.

I would like to end with this quote from Thirukkurai 594 ichapter 60%

Success and wealth will seek out their way, and reach the person, Who has an inflexible will and systematic diligence

Warmest Regards

 Natarajan, MD Regional Managing Editor.
EjeWorld Asia-Pacific (for circulation in India)